OVERVIEW AND UPDATE OF THE EMERGENCY PLAN

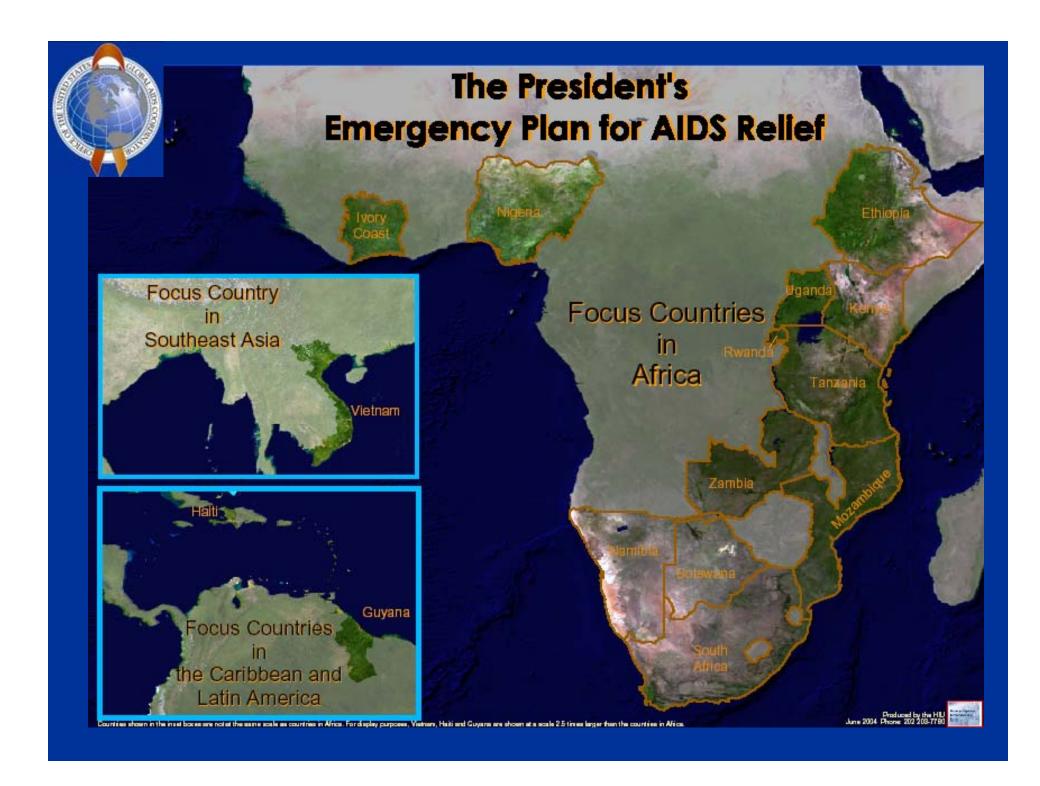
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The President's Emergency Plan for AIDS Relief

U.S. Five-Year Global HIV/AIDS Strategy









The U.S. is focusing \$9 billion of new resources in 15 of the most afflicted countries in the world. Together, these countries represent over 50% of all HIV infections worldwide.

In the 15 focus countries, we are:

- Preventing 7 million new infections
- Supporting treatment of 2 million HIV-infected people
- Supporting care for 10 million people infected and affected by HIV/AIDS, including orphans and vulnerable children

Emergency Plan Implementation

- Engender bold leadership
- Three Ones
- Strong support for GFATM
- Strong bilateral programs in over 100 countries



Critical Intervention: Prevention

Prevention remains the primary strategy to combat HIV/AIDS. The President's Emergency Plan focuses on this intervention using evidence-based prevention programs, such as:

- The "ABC" approach of Abstinence, Be faithful, and the correct and consistent use of condoms as appropriate
- Greatly expanding HIV testing
- Targeted outreach and condom distribution to high-risk populations
- Prevention of mother-to-child transmission
- Addressing gender inequality within prevention programs
- Improving medical practices and ensuring blood safety





Critical Intervention: Treatment

Treatment may be our best hope against the disease and the devastation it wreaks. It provides an incentive to get tested; reduces stigma; and, by restoring health, relieves the social and economic costs of the disease.

The United States is:

- Rapidly scaling up availability of treatment that is low-cost, safe, effective, and of high quality.
- Building capacity for long-term sustainability of quality programs
- Advancing policy initiatives that support treatment
- Collecting strategic information to monitor and evaluate progress

"When they get the antiretroviral drugs, there's a Lazarus effect, and people all of a sudden say, I have hope. And when someone has hope, that spreads to other people. There's nothing better than a hopeful society in dealing with the pandemic."





Critical Intervention: Care

HIV/AIDS and associated opportunistic infections cause severe pain and debilitating symptoms for many with advanced disease. And millions of orphans growing up without the support of their parents face increased vulnerability to violence and coercion—and to HIV.

To ease this pain and suffering, the United States is:

- Rapidly scaling up existing services for palliative care and care for orphans and vulnerable children
- Ensuring access to necessary health care supplies
- Strengthening the capacity of families and communities to care for orphans, and to provide them basic social and protective services







Not "Business as Usual"

- OGAC oversees all USG international HIV/AIDS funding regardless of implementing agency (HHS, USAID, DOD, Peace Corps, etc.) through the Country Operational Plan (COP) Process
- Ambassadors in each focus country chair an interagency task force that oversees COP implementation in country.
- Country teams share a budget
- Mission staff encouraged to "leave uniforms at the door"



Remarkable Success to Date

TREATMENT

Treatment for 155,000 people, 151,000 of them in sub-Saharan Africa.

In December 2002, WHO estimated 50,000 people were receiving life-saving antiretroviral therapy in all of sub-Saharan Africa. We were able to support 3 times that number in 8 months after Congress first approved funding.

PREVENTION

Reached 1.2 million women with PMTCT services

Reached over 120 million people with ABC messages and interventions.

CARE

Supported care for more than 1.7 million people infected and affected by HIV/AIDS, including 630,200 orphans and vulnerable children.

SUSTAINABILITY

Supported training for 312,000 health care providers in its first eight months. **More than 80% of our 1,200+ partners** working on the ground are indigenous organizations.

South Africa Context

- Population: 46.9 million
- HIV Prevalence: 21.5% (13.1-37.5)
- Number PLWA: 5.6 million
- Estimated # orphans: 1.1 million
- Targets:
 - ARV: 63,000/ 500,000
 - Care: 1.36 million/2.5 million

Country Operational Plan

- New and diverse partners
- Program balance
- Level of SAG-USG goal integration
- Private-public collaboration
- Innovative use of the media
- Emphasis on training

Country Operational Plan (2)

- Concerns over level of coordination
- Missed opportunities for TB screening, prophylaxis and treatment
- Concern over lack of detailed analysis in documents of laboratory capacity to meet scale-up. No evidence of an assessment.
- Large management burden recognized by OGAC

Technical Assistance

- Core Team Karina Rapposelli, Lead
- Membership from each agency
- Technical and managerial expertise
- Available to assist with COP
- Available to backstop country team
- Serve as reviewers and support during COP review

How do you get the funding?

- COP Review with feedback and negotiation
- Approval by Deputy Principals and Principals
- Approval Memo from Ambassador Tobias
- Submission of funding memo with justification to Congress
- 15 day (+) notification window
- Once approved, funds dispersed

QUESTIONS?